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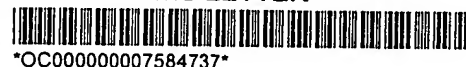
## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/072,564	02/06/2002	Li-wen Chen	52719.00016

CONFIRMATION NO. 1860

## FORMALITIES LETTER

Paul A. Durdik  
Squire, Sanders and Dempsey L.L.P.  
600 Hansen Way  
Palo Alto, CA 94304-1043

Date Mailed: 03/05/2002

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted*

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 65.

*A copy of this notice **MUST** be returned with the reply.*

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PART 2 - COPY TO BE RETURNED WITH RESPONSE

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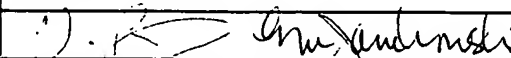
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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing) JUN 03 2002 TRADEMARK OFFICE	<b>Application Number</b>	10/072,564	
	<b>Filing Date</b>	February 6, 2002	
	<b>First Named Inventor</b>	Li-wen Chen	
	<b>Group Art Unit</b>	2661	
	<b>Examiner Name</b>	Unknown	
<b>Total Number of Pages in This Submission</b>	7	<b>Attorney Docket Number</b>	52719.00016

<b>ENCLOSURES (check all that apply)</b>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Oath/Declaration</b> <b>Two Power of Attorney</b> <b>Postcard</b>
<b>Remarks</b>		
<b>COPY OF PAPERS ORIGINALLY FILED</b>		
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
<b>Firm or Individual name</b>	Vidya R. Bhakar, Reg. No. 42,323	
<b>Signature</b>		
<b>Date</b>	May 15, 2002	

<b>CERTIFICATE OF MAILING</b>			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: May 15, 2002			
<b>Typed or printed name</b>	Eileen M. Janikowski		
<b>Signature</b>		<b>Date</b>	May 15, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

<b>0 FEE TRANSMITTAL</b> <b>for FY 2002</b> JUN 03 2002 <i>Patent fees are subject to annual revision.</i>		<b>Complete If Known</b>	
Application Number		10/072,564	
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First Named Inventor		Li-wen Chen	
Examiner Name		Unknown	
Group / Art Unit		2661	
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TOTAL AMOUNT OF PAYMENT (\$)		120	

<b>METHOD OF PAYMENT (check all that apply)</b> <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">05-0150</span> Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Squire, Sanders &amp; Dempsey L.L.P.</span> The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.					<b>FEE CALCULATION (continued)</b>																																																																																																																																																																																																																																								
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\*\*or number previously paid, if greater; For Reissues, see above

<b>SUBMITTED BY</b>				<b>Complete (if applicable)</b>	
Name (Print/Type)	Vidya R. Bhakar	Registration No. Attorney/Agent)	42,323	Telephone	(650) 856-6500
Signature				Date	May 15, 2002

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